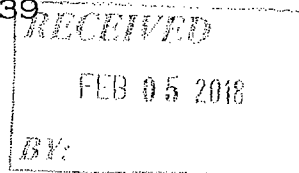


ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD  
9535 E. DOUBLETREE RANCH ROAD, SUITE 100, SCOTTSDALE, AZ 85258  
PHONE (602) 364-1PET (1738) FAX (602) 364-1039  
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**COMPLAINT INVESTIGATION FORM**

If there is an issue with more than one veterinarian please file a separate Complaint Investigation Form for each veterinarian

PLEASE PRINT OR TYPE

**FOR OFFICE USE ONLY**

Date Received: Feb. 5, 2018

Case Number: 18-140

**A. THIS COMPLAINT IS FILED AGAINST THE FOLLOWING:**

Name of Veterinarian/CVT: Tracey Scott

Premise Name: Pima Pet Clinic

Premise Address: 4832 E. Speedway Blvd.

City: Tucson State: AZ Zip Code: 85712

Telephone: 520-327-5624

**B. INFORMATION REGARDING THE INDIVIDUAL FILING COMPLAINT\*:**

Name: Barbara E. Sherrill

Address: [REDACTED]

City: [REDACTED] State: [REDACTED] Zip Code: [REDACTED]

Home Telephone: [REDACTED] Cell Telephone: [REDACTED]

\*STATE LAW REQUIRES WE HAVE TO DISCLOSE YOUR NAME UNLESS WE CAN SHOW THAT DISCLOSURE WILL RESULT IN SUBSTANTIAL HARM TO YOU, SOMEONE ELSE OR THE PUBLIC PER A.R.S. § 41-1010. IF YOU HAVE REASON TO BELIEVE THAT SUBSTANTIAL HARM WILL RESULT IN DISCLOSURE OF YOUR NAME PLEASE PROVIDE COPIES OF RESTRAINING ORDERS OR OTHER DOCUMENTATION.

**C. PATIENT INFORMATION (1):**

Name: Venus  
Breed/Species: Domestic longhair Mother = Pastel Calico  
Age: 18 Sex: F Color: Silver/Gray Father = Black

**PATIENT INFORMATION (2):**

Name: \_\_\_\_\_  
Breed/Species: \_\_\_\_\_  
Age: \_\_\_\_\_ Sex: \_\_\_\_\_ Color: \_\_\_\_\_

**D. VETERINARIANS WHO HAVE PROVIDED CARE TO THIS PET FOR THIS ISSUE:**

Please provide the name, address and phone number for each veterinarian.

Tracey Scott

**E. WITNESS INFORMATION:**

Please provide the name, address and phone number of each witness that has direct knowledge regarding this case.

None really. One guy with me one of the visits, but I'm not acquainted with him at this time.

**Attestation of Person Requesting Investigation**

By signing this form, I declare that the information contained herein is true and accurate to the best of my knowledge. Further, I authorize the release of any and all medical records or information necessary to complete the investigation of this case.

Signature: Barbara E. Shultz

Date: 11/29/17

**F. ALLEGATIONS and/or CONCERNS:**

Please provide all information that you feel is relevant to the complaint. This portion must be either typewritten or clearly printed in ink.

See attached

Was helpful at first, but eventually became adverse. Had me order urine culture, but then ~~eventually~~ told me urine test was negative. I believe for some reason got mad, because I wanted to wait for culture results to determine what antibiotic. ~~There~~ They were ~~just~~ going to give me ~~me~~ antibiotic without or before the results.

Then failed <sup>urgent</sup> care, when urgent  
care facility. Delayed care for  
Venus's severe eye, and caused  
increased damage or harm to her  
eye. Also, Wiseman Vet said X-ray they performed  
was not Venus.

September 6, 2016

Pima Pet Clinic  
4832 E. Speedway Blvd.  
Tucson, AZ 85712

RE: Venus x-ray and other


Dear Pima Pet Clinic,

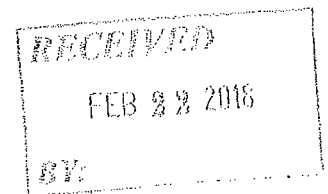
I am writing to inform you that the Wiseman Hospital told me that the x-ray you supposedly performed on my assistive cat Venus was not she at all. It was a cat that had not been spayed, when she was spayed. I provided the x-ray your facility provided me on CD to the Wiseman facility. At some point I authorized them to contact your facility, when your office told me to have the facility telling me that it was not Venus in the x-ray to contact your office. I have tried to pursue with the Wiseman facility by phone as to any further determination, but there has been harassing behavior and have not been told any different determination.

I will also mention that after seeing Venus two different times, your facility then refused to see her when she had a very urgent and serious eye condition that the Wiseman facility diagnosed as upper respiratory. She apparently contracted it at the first Vet facility we visited after she came down with what appeared to be foot drop. That facility like yours failed to urgently address the issue, instead your facility performed yet another x-ray and simply said you don't know. While your facility also engaged me to order a urine culture only to find out that supposedly Venus did not have bacteria in the result of your in house urine testing. Wiseman also performed the needle biopsy that your office should have been performing much sooner.

I had an appointment with another Vet office that I ran a few minutes late and she became irate refusing to see Venus, and the reason it was necessary to then visit your office. I will be informing her of the seriousness of that refusal when I had expected her to be seen at a scheduled appointment that I knew was urgent, as her eye had progressively worsened. I was not able to get her assistance for four or more days. Considering the seriousness of the condition, her age and the issues above, I believe this could be a problem for your facility and will be further pursuing.

Sincerely,

  
Barbara E. Sherrill, Venus's owner



February 19, 2018

Re: 18-66 In Re: Tracey Scott, D.V.M.

To Whom It May Concern:

"Venus" Sherrill, an 18 year old DLH, presented on 5/14/16 to Animal Emergency Service/Pima Pet Clinic due to decreased appetite and owner's concern that "Venus" was unable to open her mouth. Owner stated that she had seen a veterinarian in 3/2016 due to blood in urine and trouble using right rear leg. Diagnostics were done by this veterinarian and cat was placed on antibiotics for suspected urinary tract infection. According to owner, cat never improved and was seen by another veterinarian 2 days prior to the emergency visit and again placed on antibiotics for hematuria and suspected urinary tract infection. Owner also stated that she believed the mass involving the right hip area was a lipoma due to her own research. (\*NOTE\* Unfortunately, Ms. Sherrill was difficult to communicate with as she would repeatedly interrupt to discuss her own personal medical problems, her other cats and their medical problems and her personal research in regards to what this cat had and various treatments that she had tried on her own).

On physical exam, "Venus" was quiet but aware and she could easily open her mouth with no pain; no oral lesions were noted. There was a very large firm mass affecting the right coxofemoral area and on rectal it was starting to impinge into the rectal canal. The leg had atrophy and obvious wear sores on the anterior paw (cat was dragging leg and had lower motor neuron signs with this leg). Venus was also noted to be very thin (BCS 3/9).

I recommended evaluating a biochem/CBC/T4, urinalysis + scout radiographs; owner declined and authorized urinalysis and radiographs only. Hematuria, pyuria, and proteinuria was present on the urinalysis. Radiographs did not reveal any calculi in the bladder and also no bony involvement by the right hip mass. After a lengthy detailed discussion of the test results with the owner, I recommended submitting the urine for culture & sensitivity, symptomatic care (SQ fluids) while the urine culture & sensitivity was pending with the understanding that results would be faxed to regular veterinarian and reevaluation/further care would be done by regular veterinarian as well.

The mass on the right rear leg was also addressed with Ms. Sherrill. I advised her of my suspicion of a malignancy and recommended further work-up with a FNA and/or biopsy. Ms. Sherrill declined and was adamant that the mass was a benign lipoma and not problematic.

This was the last time that I saw "Venus" and Ms. Sherrill

On 5/15/16 (the following day), I called the regular veterinarian (this was the veterinarian that owner had listed on the emergency form) and updated her in detail on the case. Regular veterinarian stated that she had also tried to address the mass on the right rear leg but with no success.

Ms. Sherrill was seen again at our hospital on an emergency basis on 5/24/16 with my colleague due to suspected constipation from the mass. This was symptomatically treated. After this visit, my office received multiple, rude phone calls from Ms Sherrill. After multiple attempts to calm owner and to address her concerns, we felt that her needs would be better met by other veterinary clinics and a certified letter was sent to her on 5/25/16 to this effect.

It is now almost 2 years later and Ms. Sherrill is filing a complaint regarding her visit. Ms. Sherrill was a difficult client to communicate with as she appeared to be in denial regarding the gravity of her cat's condition (with the probable cancer affecting the right rear leg mass and obvious neurologic dysfunction with impingement into the rectal canal) and it was very difficult to convey the seriousness to her. She would repeatedly interrupt and bring up her own Valley Fever, her research on the internet, various other pets she had with similar problems, etc. She declined my recommendations as per diagnostics.

In regards to her specific complaints:

**1) Submission of the urine for culture & sensitivity and wanting to change antibiotics before results reported.** Submitting a urine for culture & sensitivity is considered standard of care to pursue chronic and/or recurrent urinary tract infections and a urinalysis may not always reveal overt bacteria. As per owner, cat was not showing any improvement with current course of Amoxicillin and thus I recommended an alternative antibiotic while the culture results were pending.

**2. Not addressing the mass on the right hip.** I discussed the mass in detail with owner including a recommendation to obtain a fine needle aspirate/biopsies of mass but owner verbally declined doing this. The mass had previously been addressed by one of her regular veterinarians and a radiologic review recommended neurologic consult which owner did not pursue. Again, she told me repeatedly that the mass was a lipoma based on her own research and not the cause of the cat's problem. When I updated the referring DVM the following day, she reported having the same communication problem with Ms Sherrill as per the mass.


**3. Giving her the wrong X-rays.** It is our facilities' protocol to give owners copies of their X-ray CDs at the time of visit. If indeed, the wrong X-ray CD had been inadvertently given to her, we would gladly have issued another disc at no charge and e-mailed a copy to the veterinarian on the same day. We were never contacted by any veterinarian regarding this problem.

**4. In regards to denying her urgent care.** Unfortunately, due to Ms. Sherrill's rude behavior and treatment of our staff a certified letter was sent to her with the recommendation that she seek care with other veterinary hospitals in Tucson. There are 3 other 24-hour emergency clinics in Tucson that she could have taken her cat to. On 6/16/2016 and 6/22/16 we received requests from two veterinary clinics for Venus' medical record. The record was faxed both times.

**5. In regards to her complaint regarding her cat's eye problem.** This was not a problem when I saw Venus and thus I can only state that there are other emergency clinics in Tucson that she could have gone to.

If I can answer any other questions, please feel free to contact me,

Sincerely,

  
Tracey Scott, DVM, ABVP

**DOUGLAS A. DUCEY**  
- GOVERNOR -



**VICTORIA WHITMORE**  
- EXECUTIVE DIRECTOR -

## **ARIZONA STATE VETERINARY MEDICAL EXAMINING BOARD**

1740 W. ADAMS STREET, STE. 4600, PHOENIX, ARIZONA 85007

PHONE (602) 364-1-PET (1738) • FAX (602) 364-1039

VETBOARD.AZ.GOV

### **INVESTIGATIVE COMMITTEE REPORT**

**TO:** Arizona State Veterinary Medical Examining Board

**FROM:** PM Investigative Committee: Donald Noah, D.V.M. - Chair  
Amrit Rai, D.V.M.  
Adam Almaraz  
Christine Butkiewicz, D.V.M. - **Absent**  
Tamara Murphy

**STAFF PRESENT:** Tracy Riendeau, CVT – Investigations  
Victoria Whitmore, Executive Director  
Sunita Krishna, Assistant Attorney General

**RE:** Case: 18-66  
Complainant(s): Barbara Sherrill  
Respondent(s): Tracy Scott, DVM (License: 1946)

#### **SUMMARY:**

Complaint Received at Board Office: 2/5/18  
Committee Discussion: 5/1/18  
Board IIR: 6/20/18

#### **APPLICABLE STATUTES AND RULES:**

Laws as Amended July 2014  
(Salmon); Rules as Revised September  
2013 (Yellow)

On May 14, 2016, "Venus," an 18-year-old female domestic long hair cat was presented to Respondent due to decreased appetite that Complainant attributed to the inability of the cat to open her mouth. Complainant reported a history of hematuria.

Respondent noted that the cat could easily open her mouth without pain. She did notice a large firm mass that was affecting the right coxofemoral area and recommended diagnostics; Complainant agreed to radiographs, urinalysis and urine culture and sensitivity only.

Complainant contends Respondent was negligent in the care of her cat.

**Complainant was noticed and did not appear.**

**Respondent was noticed was available telephonically. Counsel David Stoll appeared.**

**The Committee reviewed medical records, testimony, and other documentation as described below:**

- Complainant(s) narrative: *Barbara Sherrill*
- Respondent(s) narrative/medical record: *Tracey Scott, DVM*



**PROPOSED 'FINDINGS of FACT':**

1. On May 14, 2016, the cat was presented to Respondent due to decreased appetite. Complainant believed the cat could not open her mouth. She further relayed that the cat had a history of urinary tract infections and lameness of the right rear leg. Complainant determined the swelling over the hip was a fatty mass after doing research and the cat was on her 3<sup>rd</sup> course of antibiotics for the urinary infection and did not seem to be improving.
2. Upon exam, the cat had a weight = 8.14 pounds, a temperature = 101 degrees, a heart rate = 200bpm and a respiration rate = 28rpm. Respondent could easily open the cat's mouth without resistance from the cat. The cat could walk but dragged her right rear leg with no CP or LMN reflexes present. There was atrophy present and a relatively firm, circular mass over right coxofemoral region that was firmly attached to underlying structures; body score 3/9. Rectal revealed that the coxofemoral mass was palpable at the right rectal canal – not narrowed yet.
3. Respondent recommended blood work, radiographs and urinalysis; Complainant approved radiographs and urinalysis. Urinalysis revealed hematuria, pyuria, and proteinuria and radiographs did not show any calculi or bony involvement by the right hip mass. Respondent discussed at length the findings and recommended a urine culture and sensitivity since the antibiotics the cat was on were not working. She further recommended SQ fluids while the urine culture and sensitivity were pending with the understanding that the results would be faxed to her regular veterinarian for further care.
4. Respondent also addressed the mass on the right rear leg and her suspicion of malignancy. She recommended further work-up with a fine needle biopsy aspirate or biopsy; Complainant declined.
5. Respondent did not see Complainant again. Complainant expressed other concerns with hospital policies and procedures that did not involve Respondent. Respondent is not the responsible veterinarian for the premise.

**COMMITTEE DISCUSSION:**

The Committee discussed that after reviewing all case file materials including medical records and statements submitted, they felt Respondent handled the case appropriately.

**COMMITTEE'S PROPOSED CONCLUSIONS of LAW:**

The Committee concluded that no violations of the *Veterinary Practice Act* occurred.

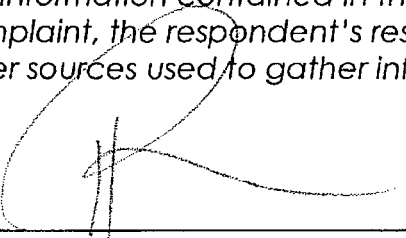
**COMMITTEE'S RECOMMENDED DISPOSITION:**

**Motion:** It was moved and seconded the Board:

*Dismiss this issue with no violation.*

**Vote:** The motion was approved with a vote of 4 to 0.

*The information contained in this report was obtained from the case file, which includes the complaint, the respondent's response, any consulting veterinarian or witness input, and any other sources used to gather information for the investigation.*

A handwritten signature in black ink, appearing to read 'Tracy A. Riendeau', is written over a horizontal line.

Tracy A. Riendeau, CVT  
Investigative Division